DOCUMENT RESUME

ED 460 529 EC 306 905

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TITLE Assessing Need and Planning for a System of Care in a Culturally Diverse Urban Community.

PUB DATE 1996-02-00

NOTE 6p.; In: A System of Care for Children's Mental Health: Expanding the Research Base. Proceedings of the Annual Research Conference (9th, Tampa, FL, February 26-28, 1996); see EC 306 844. Tables are not available from ERIC.

AVAILABLE FROM For full text: http://rtckids.fmhi.usf.edu/Proceed9th/9thprocindex.htm.

PUB TYPE Reports - Research (143) -- Speeches/Meeting Papers (150)

EDRS PRICE MF01/PC01 Plus Postage.

DESCRIPTORS Adolescents; Age Differences; Blacks; Children; *Cultural Differences; *Emotional Disturbances; Hispanic Americans; Mental Disorders; *Mental Health Programs; Minority Group Children; *Needs Assessment; *Participant Characteristics; Program Effectiveness; Program Evaluation; Urban Areas

ABSTRACT

This paper discusses the finding of two studies that assessed the need for children' mental health services in the Mott Haven community of the South Bronx, and investigated the cultural, personal, and service utilization characteristics of Mott Haven children who are recipients of existing mental health services. Results from a one-week period in 1993 found that only 160 children and youth, or 34 percent of the estimated number of children who need mental health services, utilized those services. These findings indicate a large gap between the estimate of need for services and actual use of services. Study 2 used a sample of 143 Mott Haven youth (ages 17 and under) who utilized mental health services during a one-week period in 1993 to analyze cultural and personal characteristics of program participants. African American children had a tendency to receive services outside Mott Haven, while Hispanic children tended to be served inside Mott Haven, and younger children were more likely to visit clinics than older children and youth. These results provide some support for using personal characteristics and cultural measures to better understand patterns of service utilization. (CR)

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The 9th Annual Research Conference Proceedings, A System of Care for Children's Mental Health: Expanding the Research Base (February 26 - 28, 1996).

ED 460 529

Assessing Need and Planning for a System of Care in a Culturally Diverse Urban Community

Authors

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Introduction

There is a growing urgency to develop community-based systems of care for children with serious emotional disturbances as the nation moves to provide mental health services in less restrictive and less costly living environments than those provided in institutional settings. In many communities across the country, ethnic minority children represent a significant proportion of the child population. The challenge is to find ways of incorporating these children into service delivery systems that are more culturally sensitive to them.

In response to a call for a framework that would guide the development of community-based systems of care, Stroul and Friedman (1986) proposed that "emotionally disturbed children should have access to a comprehensive array of services" (p. 18) coordinated across human service agencies such as education, social service, health, and juvenile justice. Cross, Bazron, Dennis, and Isaacs (1989) added that "when the system of care functions as an integrated support network" (p. 53), it supports and enhances the delivery of culturally competent services. In an integrated support network, the chances of considering the needs of both ethnic minority and ethnic majority children are likely to be much higher than in a fragmented and duplicative system. Cross et al. (1989) further suggested that those making plans for culturally competent systems of care need to be aware of the resources, available inside and outside communities, which can promote change. Some communities have a wealth of resources that allow them to develop home-grown, self-sustaining, and culturally competent systems of care, but many communities must rely on outside resources to sustain and enhance their own culturally competent care systems.

Study 1 of this summary provides an assessment of need for children's mental health services in the Mott Haven community of the South Bronx. Such assessment will be

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used as a baseline of the need for a community-based system of care currently being developed through the Families Reaching in Ever New Directions (FRIENDS) Initiative, a five-year project funded by a grant awarded by the federal Center for Mental Health Services. The assessment will seek to answer the following questions:

- What is a reasonable estimate of need for children's mental health services?
- What is the current utilization of children's mental health services?
- What is a reasonable estimate of the cost of mental health services currently being utilized?

Study 2 describes the cultural, personal, and service utilization characteristics of Mott Haven children who are recipients of existing mental health services through a correlational analysis. Such description is viewed as important to planning for a system of care in a culturally diverse community that is 67% Hispanic, 31% African American, and 2% Caucasian. The analysis will address the question: To what extent are the cultural and personal characteristics of Mott Haven children related to the children's utilization of mental health services?

Method and Results

Study 1

The New York State Office of Mental Health (NYSOMH, 1992) has developed a population-based approach to estimate the need for mental health services for children in specific communities across the state. This methodology resulted in estimates of the number of children needing services during a typical week of the year for each of seven types of mental health programs (acute inpatient and crisis residential, home-based crisis intervention, intermediate inpatient, residential, school-based clinical, intensive case management, and clinical). Low, average, and high need for capacity rates per 100,000 children in the population were generated based on geographic differences. The high rate was applied to the child population of Mott Haven because of the presence of the many environmental risk factors that are believed to exacerbate the mental health conditions of the children. The first column of Table 1 shows the estimate of needed capacity for each of the seven types of mental health programs. As indicated, a system of care in Mott Haven would need to serve at least 467 children on a continuous basis. These children represent 1.4% of the population of 32,793 children and youth residing in Mott Haven. This is consistent with Friedman's (1987) estimate that a public system of care should have a capacity to serve between 1 to 2 percent of children at any given time.

Second, the above estimate was compared to the actual utilization of mental health services by Mott Haven children and youth during a one-week period in 1993, as reported in the Patient Characteristics Survey of the NYSOMH. As

the Patient Characteristics Survey of the NYSOMH. As seen in the second column of Table 1, only 160 children and youth, or 34% of the estimated number of children who need mental health services, utilized those services.

Third, Table 2 reports cost estimates for each of the seven types of mental health services per unit of utilization, for total units utilized, and for an entire year. The figure of $4,234,932 provides an estimate of the total annual cost of sustaining a comprehensive array of services for children and youth ages 21 and younger in the Mott Haven community.

Study 2

Plans to develop a culturally competent system of care are enhanced by information on how cultural and personal characteristics of children with mental health needs relate to the children's utilization of mental health services. Such relationships were explored among a sample of 143 Mott Haven children and youth ages 17 and under who utilized mental health services during a one-week period in 1993. Measures of cultural and personal characteristics included Ethnicity (African American = 1, Hispanic = 2), Primary Language (English = 1, Other language = 2), Age Group, defined as eight age categories between 0 to 17, and Gender. Children's service utilization was measured through Program Type (Outpatient = 1, Inpatient = 2), Clinic Visits, with a 0 to 2 range, Day Treatment Visits, with a 0 to 5 range, and Location (inside or outside Mott Haven). The measures of visits to clinic and day treatment programs were selected because clinic and day treatment were the services to which Mott Haven children had the greatest access.

Table 3 shows Pearson correlations between the measures of cultural and personal characteristics and the measures of children's service utilization. Ethnicity had a relatively strong negative relationship with Location indicating that African American children had a tendency to receive services outside Mott Haven, while Hispanic children tended to be served inside Mott Haven. Primary Language had a moderate negative relationship with Location. Since Spanish was the primary language for many of the children, the finding suggests that these children had better access to mental health services within Mott Haven rather than outside Mott Haven. Ethnicity and Primary Language were weakly and positively related to Clinic Visits suggesting a tendency for Hispanics and persons speaking Spanish and other languages to visit clinics more often than African Americans. Finally, there was a weak negative relationship between Age Group and Clinic Visits suggesting that younger children are more likely to visit clinics than older children. Among possible explanation is that older children and youth may view visits to a clinic as potentially stigmatizing.

Discussion

Discussion

Study 1 in this paper suggested the utility of applying a population-based approach to estimating the need for a comprehensive array of mental health services for children with mental health needs in an urban community such as Mott Haven. The estimate of need for services in Mott Haven was compared to the children's actual use of services showing that there may be a large gap between the need and the use of services. An estimate of the cost of providing mental health services to Mott Haven children in 1993 was possible given the availability of information on the children's use of services. The long term benefit of having a baseline estimate of mental health service costs is that it will make it possible to compare it with an estimate of costs after a new system of care for children has been implemented through the FRIENDS Initiative. At such time, it will also be possible to determine whether a new system of care reduces or increases costs of serving children with mental health needs in an urban community.

The findings in Study 2 provide some support for using personal characteristics and cultural measures to better understand patterns of service utilization in culturally diverse urban communities. It was particularly interesting to see the extent to which children from African American and Hispanic backgrounds appeared to use mental health services differentially inside and outside Mott Haven. Such finding suggests the need to develop a fuller understanding of the cultural factors that mediate the differential use of services by children with mental health needs.

Estimating service needs, determining rates of service utilization, estimating service costs, and understanding personal cultural factors that mediate service use are all important components in planning systems of care for children with mental health needs that are also culturally competent. This study serves as a starting point for describing the relationship between these indices.

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Liberton, C., Kutash, K., & Friedman, R. M. (Eds.), (1997). The 9th Annual Research Conference Proceedings. A System of Care for Children's Mental Health: Expanding the Research Base (February 26 - 28, 1996). Tampa, FL: University of South Florida, Louis de la Parte Florida Mental Health Institute, Research & Training Center for Children's Mental Health.